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CONFIRMATION NO. 9566

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10/573,302	09/07/2006	602	3772	UMB001-039US

APPLICANTS

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**** CONTINUING DATA ***** YES JMR**
 This application is a 371 of PCT/US04/22715 06/30/2004
 which claims benefit of 60/504,430 09/22/2003

**** FOREIGN APPLICATIONS ***** NO JMR**

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** * SMALL ENTITY ****
 10/12/2006

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance JMR Initials	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		MD	0	18	1

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TITLE

Lower leg orthosis

FILING FEE RECEIVED 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit